

Jackson Hole Fire/EMS Operations Manual

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Title: Treatment Protocol:

Fractures

Division: 17 Article: 4.13

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Pages: 2

FRACTURES (Treatment Protocol)

ALL PROVIDERS

Check ABC's

Provide respiratory support if indicated

 Administer Oxygen via nasal cannula to obtain oxygen saturation > 94%. May increase to 100% NRB as needed

Expose injury by removing or cutting away clothing

Assess the distal neurological and circulatory status of the region injured

Remove rings or constrictive jewelry and clothing in regions that may swell due to injury

Perform splinting

Immobilize joints above and below fracture site

- Consider traction splint for mid-shaft femur fractures that do not have additional distal injuries
- O Utilize caution, gentle handling and slight traction to return severely angulated extremities or extremities that are pulseless and deformed to normal position of function
- After splint application, recheck distal circulation, motor and sensory function then document

Open Fractures:

Cover exposed bone ends with a sterile saline moistened dressing if exposed

- Apply traction to angulated fractures to obtain anatomical alignment for splinting and regaining distal neurovascular status (if possible). Bandage wound as needed to control bleeding
- Elevate injury if possible and consider cold pack

ADULT EMT-BASIC PROVIDER

PEDIATRIC EMT-BASIC PROVIDER

Follow as above

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EMT-INTERMEDIATE PROVIDER

- Establish an IV TKO and bolus as needed
- Administer Morphine or Fentanyl for pain (Voice Order)
- Consider Diazepam in cases of severe anxiety or muscle spasm (Voice Order)
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 Administer Morphine or Fentanyl (Voice Order)

-INTERMEDIATE PROVIDER

 Consider Diazepam in cases of severe anxiety or muscle spasm (Voice Order)

EMT-PARAMEDIC PROVIDER

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- Administer Morphine or Fentanyl
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